# SIGNATURE: OLIVIA PRITCHARD

Electronic Signature of Signing Authorized Person(s) Detail

#### 2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000130717

Entity Name: PRITCHARD'S PRESERVES, LLC

#### Current Principal Place of Business:

1722 SHERIDAN STREET 192 HOLLYWOOD, FL 33020

## **Current Mailing Address:**

1722 SHERIDAN STREET 192 HOLLYWOOD, FL 33020

## FEI Number: 81-3568658

## Name and Address of Current Registered Agent:

MILLS METZ LAW 40 NW 3RD STREET 200 MIAMI, FL 33128 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE:

# Electronic Signature of Registered Agent

AMBR	Title	AMBR
PRITCHARD, OLIVIA	Name	SHARPTON, AUBREY J III
1722 SHERIDAN STREET NO. 192	Address	1722 SHERIDAN STREET NO. 192
HOLLYWOOD FL 33020	City-State-Zip:	HOLLYWOOD FL 33020
	AMBR PRITCHARD, OLIVIA	AMBRTitlePRITCHARD, OLIVIAName1722 SHERIDAN STREET NO. 192Address

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

FOUNDER

FILED Apr 25, 2018 Secretary of State CC5814541127

Certificate of Status Desired: No

04/25/2018

Date

Date